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**\*BIBDATASHEET\***

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 \*\* CONTINUING DATA \*\*\*\*\*  
*None II*

 \*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None II*

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 double pat. relate

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	NY	7	45	4
Examiner's Signature _____ Initials _____				

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## TITLE

Thermal physical vapor deposition source with minimized internal condensation effects

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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